

PRINTER RUSH

(PTO ASSISTANCE)

IFW

10/751,546

Application: 10/751546

Examiner: Le

GAU: 3751

From: ewc

Location: IDC FMF FDC

Date: 3-7-05

4th Request

Tracking #: 05998476

Week Date: 8-16-04

ATTN: Rori Burch, supervisor query, patents

| DOC CODE | DOC DATE | MISCELLANEOUS |
|--|----------------|--|
| <input type="checkbox"/> 1449 | | <input type="checkbox"/> Continuing Data |
| <input type="checkbox"/> IDS | | <input type="checkbox"/> Foreign Priority |
| <input checked="" type="checkbox"/> CLM | <u>1-5-04</u> | <input type="checkbox"/> Document Legibility |
| <input checked="" type="checkbox"/> IIFW | <u>8-10-04</u> | <input type="checkbox"/> Fees |
| <input type="checkbox"/> SRFW | | <input type="checkbox"/> Other |
| <input type="checkbox"/> DRW | | |
| <input type="checkbox"/> OATH | | |
| <input type="checkbox"/> 312 | | |
| <input type="checkbox"/> SPEC | | |

[RUSH] MESSAGE:

Fixed claims 10 and 11 depend upon final
claim 12. Please update index

Thank you

[XRUSH] RESPONSE:

~~Please see the responses dated 05/01/05 and~~
~~02/23/05. Thank you.~~


claims renumbered in Index of Claims.
Dependencies now OK. See attached corrected
IFW.

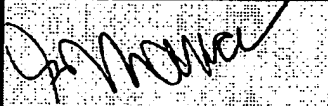

DGO

INITIALS: #

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04

| | | | |
|--|-----------------|--------------------|--|
| Issue Classification  | Application No. | Applicant(s) | |
| | 10/751,546 | LIM, HOWARD TAK SU | |
| | Examiner | Art Unit | |
| | Huyen Le | 3751 | |

| ISSUE CLASSIFICATION | | | | | | | | | |
|---|---|----------|---|------|---|--|-----------------------------------|--|--|
| ORIGINAL | | | | | CROSS REFERENCE(S) | | | | |
| CLASS | | SUBCLASS | | | CLASS | | SUBCLASS (ONE SUBCLASS PER BLOCK) | | |
| 4 | | 420.4 | | | 4 | | 443 | | |
| INTERNATIONAL CLASSIFICATION | | | | | | | | | |
| E | 0 | 3 | D | 9/08 | | | | | |
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| Huyen Le 08/06/04 (Assistant Examiner) (Date) | | | | |  (Primary Examiner) 9/9/04 (Date) | | | | |
|  (Legal Instruments Examiner) 8/9/04 (Date) | | | | | | | | | |
| | | | | | Total Claims Allowed: 17 | | | | |
| | | | | | O.G. Print Claim(s) | | O.G. Print Fig. | | |
| | | | | | 1 | | 1 | | |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | |
|--|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | | 31 | | 61 | | 121 |
| 2 | 2 | | 32 | | 62 | | 122 |
| 3 | 3 | | 33 | | 63 | | 123 |
| 4 | 4 | | 34 | | 64 | | 124 |
| 5 | 5 | | 35 | | 65 | | 125 |
| 6 | 6 | | 36 | | 66 | | 126 |
| 7 | 7 | | 37 | | 67 | | 127 |
| 8 | 8 | | 38 | | 68 | | 128 |
| 9 | 9 | | 39 | | 69 | | 129 |
| 10 | 10 | | 40 | | 70 | | 130 |
| 11 | 11 | | 41 | | 71 | | 131 |
| 12 | 12 | | 42 | | 72 | | 132 |
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| 14 | 14 | | 44 | | 74 | | 134 |
| 15 | 15 | | 45 | | 75 | | 135 |
| 16 | 16 | | 46 | | 76 | | 136 |
| 17 | 17 | | 47 | | 77 | | 137 |
| 18 | 18 | | 48 | | 78 | | 138 |
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| 20 | 20 | | 50 | | 80 | | 140 |
| 21 | 21 | | 51 | | 81 | | 141 |
| 22 | 22 | | 52 | | 82 | | 142 |
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